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THIS SPACE FOR OFFICE USE ONLY



HAWAII STATE ETHICS COMMISSION
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STATE OF HAWAII
STATE ETHICS COMMISSION**LOBBYIST REGISTRATION FORM**

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
Farley	Jerald	E.	206-363-7573
MAILING ADDRESS (Street)			FAX
16526 Shore Drive N.E.			206-363-7575
(City)	(State)	(Zip Code)	
Lake Forest Park	Washington	98155-5631	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Responsible Use of Fireworks Association			206-363-7573
MAILING ADDRESS (Street)			FAX
16526 Shore Drive N.E.			206-363-7575
(City)	(State)	(Zip Code)	
Lake Firest Park	Washington	98155-5631	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Responsible Use of Fireworks Association			206-363-7573
MAILING ADDRESS (Street)			FAX
16526 Shore Drive N.E.			206-363-7575
(City)	(State)	(Zip Code)	
Lake Forest Park	Washington	98155-5631	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Jerald E. Farley			206-363-7573
MAILING ADDRESS (Street)			FAX
16526 Shore Drive N.E.			206-363-7575
(City)	(State)	(Zip Code)	
Lake Forest Park	Washington	98155-5631	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Agriculture	<input checked="" type="checkbox"/> Education	<input type="checkbox"/> Human Services	<input checked="" type="checkbox"/> Science, Technology & Economic Development
<input checked="" type="checkbox"/> Communications & Public Utilities	<input checked="" type="checkbox"/> Government Operations & Finance	<input checked="" type="checkbox"/> Intergovernmental Relations, International Affairs	<input checked="" type="checkbox"/> Tourism & Recreation
<input checked="" type="checkbox"/> Consumer Protection & Commerce	<input checked="" type="checkbox"/> Hawaiian Affairs	<input checked="" type="checkbox"/> Labor & Employment	<input checked="" type="checkbox"/> Transportation
<input checked="" type="checkbox"/> Culture, Arts, Historic Preservation	<input checked="" type="checkbox"/> Health	<input type="checkbox"/> Planning, Land & Water Use Management	Other: (indicate below)
<input checked="" type="checkbox"/> Ecology, Energy Environmental Protection	<input type="checkbox"/> Housing	<input checked="" type="checkbox"/> Public Safety & Corrections	_____

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

Jerald E. Farley

(Signature of Lobbyist)

January 1, 2005

(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Jerald E. Farley	Executive Director

NAME OF ORGANIZATION (if applicable)
Responsible Use of Fireworks Association

TELEPHONE
206-363-7573

MAILING ADDRESS (Street)
16526 Shore Drive N. E.

FAX
206-363-7575

(City)	(State)	(Zip Code)
Lake Forest Park	Washington	98155-5631

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

Jerald E. Farley

(Signature of Authorizing Officer or Person Represented)

January 1, 2005

(Date)